

704467

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

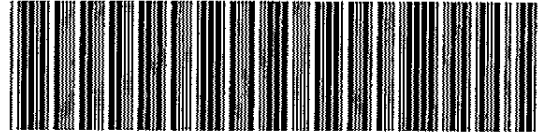
(Business Entity Name)

(Document Number)

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DIVISION OF CORPORATIONS  
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✓ O/D Resign.

07/21/05

Dc

**TRANSMITTAL LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Florida Memorial University, Inc.  
\_\_\_\_\_  
(Name of Corporation)

**DOCUMENT NUMBER:** 704467  
\_\_\_\_\_

The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.  
Please return all correspondence concerning this matter to the following:

Dr. Mary A. O'Banner  
\_\_\_\_\_  
(Name of Person)

Florida Memorial University, Inc.  
\_\_\_\_\_  
(Name of Firm/Company)

15800 N.W. 42nd Avenue  
\_\_\_\_\_  
(Address)

Miami Gardens, FL 33054  
\_\_\_\_\_  
(City/State and Zip Code)

For further information concerning this matter, please call:

Dr. Mary A. O'Banner at ( 305 ) 626-3612  
\_\_\_\_\_  
(Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for \$35.00 made payable to the Florida Department of State.

**Mailing Address:**  
Amendment Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Street Address:**  
Amendment Section  
Division of Corporations  
409 E. Gaines Street  
Tallahassee, FL 32399

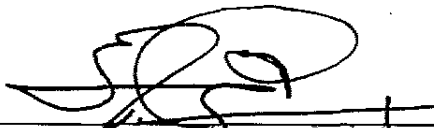
**OFFICER / DIRECTOR RESIGNATION  
FOR A CORPORATION**

I, George F. Knox, Esq., hereby resign as Trustee/Vice Chairman  
(Title)

of Florida Memorial University, Inc.  
(Name of Corporation)

704467, a corporation organized under the laws of the State of  
(Document Number, if known)

Florida

  
\_\_\_\_\_  
(Signature of resigning officer/director)

**FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
05 JUL 18 AM 10:28**

**FILING FEE IS \$35.00**

**Make checks payable to Florida Department of State and mail to:**

Amendment Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, Florida 32314